

Marathon Petroleum Company LP			
Owner Controlled Insurance Program (OCIP) Procedure	Document No.: RSW-SAF-072-DT	Approval Date: 09/06/2018	Page 1 of 6
	Revision No.:10	Next Revision Date: 03/01/2021	
	Document Custodian: Environmental, Safety and Security		

**1.0 PURPOSE**

1.1 The purpose of this guideline is to detail who the Owner-Controlled Insurance Program (OCIP) effects, how it is implemented, and additional forms and procedures required by the program.

**2.0 SCOPE**

2.1 This procedure applies only when an Owner Controlled Insurance Program is in effect at Marathon Petroleum Company LP (MPC) Detroit refinery.

2.2 The Owner Controlled Insurance Program includes contractors, all tier subcontractors, and other designated by MPC who perform direct labor at the project site or sites incidental to the work except for:

- 2.2.1 Contractors performing work away from the site, including fabrication
- 2.2.2 Contractors performing Asbestos or Lead Abatement or Environmental, Remediation, or Demolition work
- 2.2.3 Vendors, suppliers, material dealers, truckers and their respective tier subs whose sole function is to transport, pickup deliver or carry materials, supplies, tools, equipment, parts or other items to or from the project site or who do not perform any actual on-site labor.
- 2.2.4 Non-badged persons performing pre-employment aptitude / skill tests in on-site locations specifically designated for this activity.

2.3 The OCIP does not apply to MPC personnel in any way.

**3.0 GUIDELINE**

3.1 Responsibilities

3.1.1 Contractor Management:

- 3.1.1.1 Each contractor must enroll in the OCIP unless excluded per section 2.1 of this procedure.
- 3.1.1.2 Each contractor must communicate manpower and hours to Marsh as required by the contract documents.
- 3.1.1.3 Each contractor must inform their management and personnel of the OCIP and follow the notification and reporting requirements listed in section 3.4 of this procedure.
- 3.1.1.4 Once an injury/illness occurs on site, the contractor safety and management is required to assist in controlling the immediate area and potentially affected personnel, investigating the incident, and managing the care and recovery of their employee.

3.1.2 MPC Safety – OCIP Coordinator:

- 3.1.2.1 Function as a point of contact for the Detroit refinery with the MPC Absence Management department in Findlay, OH.
- 3.1.2.2 Maintain records of OCIP enrolled contractor injury/illness information.
- 3.1.2.3 Review reports with medical staff to ensure knowledge of each incident and confirmation of the management of each case.

3.1.3 MPC – Absence Management Department

- 3.1.3.1 Act as single point of contact between MPC Findlay Absence Management and the Detroit refinery to manage all claims resulting in off-site treatment or evaluation that would generate a Worker’s Compensation (WC) claim.
- 3.1.3.2 Coordinate the other non-MPC OCIP entities involved in handling the administration, care, claim management and billing aspects of the OCIP program.

3.2 Return To Work (RTW) Program

- 3.2.1 In order to be prepared for a potential restricted / modified duty case injury, each contractor is required to submit a site-specific RTW program to the MPC OCIP Coordinator for review and approval. Minimum requirements of the RTW program are as follows:
- 3.2.1.1 Functional Job Descriptions:
- 3.2.1.1.1 Evaluate each trade the contractor employs as well as office staff and management
  - 3.2.1.1.2 Describe, in a typical day, how much sitting, standing, climbing, lifting, etc. is done as well as how heavy typical lifting tasks are and how often typical activities are performed
  - 3.2.1.1.3 Using percentages is the recommended way to evaluate and describe the requested information
- 3.2.1.2 Modified Duty Tasks:
- 3.2.1.2.1 Develop a site-specific list of tasks within the “parameters” of the worker’s trade or position.
  - 3.2.1.2.2 Develop actual list of tasks with detailed descriptions and level of exposures
  - 3.2.1.2.3 Try to keep tasks out in the work area that encourage sense of productivity to the project
  - 3.2.1.2.4 Office tasks should be last resort.
- 3.2.1.3 Means / Methods of Communication:
- 3.2.1.3.1 Determine who will communicate with medical staff, MPC OCIP Coordinator, and Worker’s Compensation personnel, how they plan to communicate, and when that communication would take place.
  - 3.2.1.3.2 Detail the plan for communication with the injured employee about the doctor’s requirements, employee’s perspective, and the company’s accommodations.
- 3.2.1.4 Recovery Monitoring:
- 3.2.1.4.1 Detail a plan to ensure the injured employee understands exactly what they can and cannot do as a result of their medical restrictions.
  - 3.2.1.4.2 Detail company’s plan to manage and ensure the injured employee does not work or perform any activity outside of their medical restrictions.
- 3.2.1.5 Maintain Culture:
- 3.2.1.5.1 Detail a plan to disseminate information to necessary contractor personnel in order to assist in creating and maintaining a positive work environment following injury and during the recovery period.
  - 3.2.1.5.2 Detail a plan to incorporate the worker back into the work environment once restrictions are lifted. This plan could include communication with the employee, additional monitoring of the employee, and final release of the employee to full duty.
- 3.3 Incident / Injury Notification
- 3.3.1 The incident notification process for OCIP enrolled contractors remains exactly the same as the existing refinery procedure. Each contractor’s employees are given the “In the Event of an Injury” card and hardhat sticker required to be worn on their person while on MPC property. The contact information given on that card is also detailed on the [Contractor’s Injury Notification & Reporting Flow Chart](#). Refer to the [Injury Management Procedure RSW-SAF-037-DT](#) for additional information.
- 3.3.2 Off-Site Medical Care: When an OCIP-enrolled contractor employee suffers an injury requiring medical diagnosis or care beyond the capabilities of the on-site medical staff or

equipment, additional notifications must be given and forms completed in accordance with the descriptions and time frames detailed below.

### 3.3.2.1 Notifications:

#### 3.3.2.1.1 MPC Absence Management – Findlay, OH

3.3.2.1.1.1 Under all circumstances involving an OCIP-enrolled contractor employee going off-site for diagnostic help or medical care, MPC Absence Management must be notified as soon as is feasibly possible.

3.3.2.1.1.1.1 Phone: 419-421-2437

3.3.2.1.1.1.2 Email: [blgilley@marathonpetroleum.com](mailto:blgilley@marathonpetroleum.com)

3.3.2.1.1.2 If the primary contact cannot be contacted or is out of the office, then the backup contact should be called:

3.3.2.1.1.2.1 419-421-3811

3.3.2.1.1.3 If the injury situation occurs on a weekend, holiday, or after normal business hours, call MPC Absence Management as directed above and leave a detailed voicemail for them to follow up on at their earliest opportunity.

#### 3.3.2.1.2 MPC Medical Staff – Detroit Refinery

3.3.2.1.2.1 The MPC medical professional providing the onsite care should call ahead to the chosen off-site medical facility to help arrange the needed medical assistance or treatment. This will greatly reduce the time spent waiting to be seen and will provide for better communication of the diagnosis or additional medical care between the two medical facilities.

3.3.2.1.2.2 The MPC medical professional providing the onsite care must also accompany the injured/ill worker to the off-site medical facility.

3.3.2.1.2.3 In all incident situations, MPC's Safety Supervisor must be notified in a timely fashion. This is required not only for notification purposes, but also so that MPC Safety can make various resources available to the contractor to assist with management of the incident situation.

3.3.2.1.2.4 Prior to the employee leaving the site, the MPC Safety Supervisor must be notified of the situation, where the worker will be taken, and the purpose of the offsite medical assistance.

### 3.3.2.2 Forms & Documentation:

3.3.2.2.1 [RSW-SAF-037-Form01-DT OI&I Form](#) and [RSW-SAF-037-Form02-DT First Hand Account of Incident Form](#) forms must be completed as described in section 3.5.1.4 of this procedure.

3.3.2.2.2 NOTE: The forms referenced below are available through MPC's Absence Management Department.

#### 3.3.2.2.3 **Avizent – WHAT YOU SHOULD KNOW**

3.3.2.2.3.1 This form should be given to the injured employee for their review & retention in the event that an injury requires off-site treatment or evaluation.

3.3.2.2.3.2 This form introduces the injured employee to Avizent, the OCIP Worker's Compensation Claims Administrator.

3.3.2.2.3.3 This form also gives description of what Avizent does to help the injured worker recover from their injury and return to work

as soon as possible and give contact information for the injured employee should they need it.

3.3.2.2.4 **Authorization Form to Use and Disclose Protected Health Information**

3.3.2.2.4.1 This form is to be completed by the injured employee

3.3.2.2.4.2 Print complete name in the blank

3.3.2.2.4.3 Write complete social security number in the blank

3.3.2.2.4.4 List the names of all healthcare facilities involved in caring for the injured employee for this particular injury and any pre-existing conditions. Include the name of the MPC on-site medical professional as well.

3.3.2.2.4.5 Detail the specific injury and body location of the injury being diagnosed or treated. This will limit the authorization of medical records to the specific injury and not the employee's complete medical record they may have at that off-site facility.

3.3.2.2.4.6 Make the date the authorization is valid for one (1) year from the date of the injury they are receiving diagnosis or care for.

3.3.2.2.4.7 The injured employee's signature, printed name, and the appropriate date are required at the bottom of the form.

3.3.2.2.4.8 Have employee complete both copies of this form in the packet. One is to be returned to the MPC OCIP Coordinator and the other is for the injured employee to keep for their records.

3.3.2.2.5 **"Dear Health Care Provider" letter:**

3.3.2.2.5.1 This document provides information for the medical facility directing them on where and to whom to send the bills for the diagnosis or care provided so they can be paid for their services.

3.3.2.2.5.2 By providing this information to the medical facility, WC payments will be made in a timely manner and the injured employee will not be bothered by the medical facilities asking them for payment.

3.3.2.2.5.3 If the injured worker is taken to Henry Ford Occupational Health Center in Harbortown, this form is not required to be given to the receptionists as the protocol has already been established. They must, however, be told that the injured worker is an OCIP-enrolled contractor at MPC.

3.3.2.2.6 **Physical Abilities Form for Contractor Employees:**

3.3.2.2.6.1 The purpose of this form is to document any work restrictions prescribed by the treating physician in order to tailor any light or restricted/transferred duty work and set time frames for release back to full duty.

3.3.2.2.6.2 Many medical facilities have their own forms they use to document this information and may refuse to use this provided form. In any case, request that they complete the information on this OCIP form. If they refuse a suitable alternative must be provided.

3.3.2.2.7 **Progressive Medical Inc. First Fill Program:**

3.3.2.2.7.1 This form is only used when the injured employee is given a prescription for medication as a result of the work-related

injury. This program allows the prescription to be filled with no out-of-pocket money by the injured employee.

3.3.2.2.7.2 The MPC OCIP Coordinator or contractor supervision will complete the “ID/Auth#”, “Injured Party’s Name”, “Date of Birth”, and “Gender” sections according to the directions on the First Fill Card at the bottom of the form.

3.3.2.2.7.3 The OCIP Coordinator must call MPC Absence Management with the injured worker’s social security number and the name and location of the pharmacy where the prescription will be filled to ensure the injured worker has no issues filling the prescription.

3.3.2.2.7.4 The injured employee will take the First Fill Card with them to an approved pharmacy to have the prescription filled at no cost to them.

3.3.2.2.7.5 A sample listing of participating pharmacies is provided on the back of the form. For additional pharmacies, follow the directions at the bottom of the back page.

3.3.2.3 Once the off-site medical diagnosis or care has been concluded, scan and email a copy of the incident report and all other documentation to MPC Absence Management at the email address listed in 3.5.2.1.1.2. This will allow for prompt handling of information to the WC claims administrator for payment of the medical bills and managing of the injury care.

#### 3.4 Incident Analysis & Reporting

3.4.1 All incidents resulting in injury to an OCIP enrolled contractor employee will be analyzed to discover the cause, contributing factors, and corrective / preventive actions per [RSW-SAF-037-DT Injury Management Procedure](#).

#### 3.5 [RSW-SAF-072-Form01-DT Safety Task Analysis \(STA\)](#)

3.5.1 The STA is an incident prevention tool that is required to be used by all OCIP-enrolled contractors to help supervision plan safety into the work. The STA is part of each crew’s morning safety meeting that promotes open communication between supervision, safety, and all members of the crew BEFORE the work begins. This meeting and discussion ensures an understanding of the task, potential hazards, and protective measures required for the job.

3.5.2 The STA is a per-task form that may require contractor’s personnel to complete more than one STA in a given day provided their job task changes to such an extent as to present a significant change in assignment, hazards, and/or protective measures from the original task assigned at the start of the work day. A change in physical location that would require a new work permit also requires a new STA prior to the work beginning.

3.5.3 The STA employs both a checklist and an “essay” style format to identify all the safety information needed before performing work. Make sure all sections of the STA are addressed adequately with special attention given to the sections entitled “Step 1 – General Task Assignment”, “Step 2 – Potential Hazards”, and “Step 3 – Safe Work Practices Pertinent to Hazards”. These three sections MUST be completed with as much detail as possible. Do not rely solely on the checklist information when filling out the STA form.

3.5.4 All personnel – without exception – assigned to a specific STA must print their name in the “Involved Crew Members” section once they have reviewed the STA. This indicates that they have reviewed and understand the information in the STA with their supervisor and agree to work in a safe manner in accordance with the STA.

3.5.5 At the end of the day, the supervisor must complete the “Post STA” section indicating whether or not the work was performed without incident and if any additional safety improvements were identified. Once the Post STA section is completed, each of the “Involved Crew Members” must sign next to their printed name indicating they worked without injury that day or reported the injury to their supervision as required. (Signs are

also posted at all refinery exits as a reminder of this policy.) Once both sections are complete, the completed form must be placed in a STA Collection box located in one of the Complex Control rooms or other satellite locations set up around the facility. The STA will be reviewed by MPC Safety and retained on site for the duration of the OCIP.

#### 3.5.6 Exceptions to the STA Process

3.5.6.1 If established upon review of an OCIP contractor's current job analysis process that the requirements and intent of the STA process are met, contractors may utilize their own internal process. A full review must be completed with involvement from the MPC safety department and approval from the safety supervisor.

3.5.6.2 Companies approved to utilize their internal process:

3.5.6.2.1 Altair Strickland

3.5.6.2.2 Koch

3.5.6.2.3 SealTech

## 4.0 DEFINITIONS

## 5.0 REFERENCES

5.1 [RSW-SAF-037-DT Injury Management Procedure](#)

5.2 [RSW-SAF-037-Form02-DT First Hand Account of Incident Form](#)

5.3 [RSW-SAF-037-Form01-DT OI&I Form](#)

## 6.0 ATTACHMENTS

6.1 [RSW-SAF-072-Form01-DT Safety Task Analysis \(STA\) Form](#)

6.2 [RSW-SAF-072-Form02-DT Contractor's Injury Notification & Reporting Flow Chart](#)

## 7.0 REVISION HISTORY

Revision number	Description of change	Written by	Approved by	Effective date
6	Updated the STA section to provide allowance for contractors to utilize internal process as a substitute for the STA if approved	E. Neubauer	J. Rabideau	11/03/17
7	Corrected link to 6.1 Safety Task Analysis	F. Ebbert	J. Rabideau	02/02/18
8	Added Altair Strickland to STA exception	E. Neubauer	J. Rabideau	05/09/18
9	Added Koch to STA exception	E. Neubauer	J. Rabideau	09/06/18
10.	Eliminated STA requirement	A. Morales	A. Morales	2/21/20